

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB	De-2 i-a	
O.I.P.E. CLASSIFIER		48	7/5/01
FORMALITY REVIEW	HS	866	8-15-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	Original
2	Final ✓ 07/22/01
3	✓
4	✓
5	✓
6	✓
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If more than 150 claims or 10 actions  
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Best Available Copy

149  
16/6/01